

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	N-A		07/16/01
O.I.P.E. CLASSIFIER		8	7-22-01
FORMALITY REVIEW	L-I	106	8/22/01
RESPONSE FORMALITY REVIEW	M-10	J010	8/22/01

09/903/89  
Cancelled  
Claim 7  
12/8/03 Ampt

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 + ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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